

REMARKS

The following remarks are submitted to be fully responsive to the Official Action dated March 29, 2007. This response is thus timely submitted within the three-month shortened statutory period for response. Should any fees be required, the Commissioner is authorized to charge Kagan Binder Deposit Account No. 50-1775 and thereafter notify us of the same. Reconsideration of all outstanding grounds of the rejection and allowance of the subject application are believed in order and respectfully requested.

Claims 1-14, 16-20 and 32-42 are pending in the above-identified patent application. Claims 1-14, 16-20 and 32-42 were rejected. Applicant presently amends claims 1, 3, 8, 18, 32 and 39 as indicated above. Applicant submits that the amendments to the claims are fully supported by the application as originally filed and that such claims do not present new matter.

In the Official Action, claims 1, 2, 4, 9, 14, 32, 33, 35 and 42 were rejected under 35 U.S.C. 102(e) as being anticipated by Stanish (U.S. Pat. No. 6,585,762; hereinafter "Stanish").

Stanish teaches an arteriovenous vascular graft prosthesis and methods for implanting such grafts (col. 4, lines 37-41; col. 9, lines 8-9). The embodiment referred to in the Official Action (in Figure 11), includes a cuff 480 on the venous end of a graft 465 that is positioned within a target vein and secured to the wall of the vein (col. 9, lines 14-28). Stanish does not disclose withdrawing the graft 465 through the cuff 480. It would be contrary to the disclosed method to withdraw or remove the graft 465 since the purpose of the method is to attach the graft 465 to the target vein. Accordingly, it is submitted that independent claims 1 and 32 as currently amended are patentably distinguished from Stanish, and as such, it is respectfully requested that the 102(e) rejection with respect to claims 1, 2, 4, 9, 14, 32, 33, 35 and 42 be withdrawn.

Claims 1, 7, 32 and 38 were rejected under 35 U.S.C. 102(b) as being anticipated by Butters et al. (U.S. Pat. No. 6,019,788; hereinafter "Butters").

Butters teaches a device for providing fluid connection between a blood conduit and a native blood vessel (col. 3, lines 19-22). The device includes a distensible intraluminal segment 22 for positioning within a native blood vessel, a sealed connection between the intraluminal segment 22 and the blood conduit 16, and, preferably, a mechanism for anchoring the intraluminal segment 22 to the native blood vessel (col. 3, lines 22-28). Preferably, the device incorporates a cuff 28 that is provided to improve anchoring and a fluid tight seal between the blood conduit 16 portion and the attached native blood vessel (col. 6, line 66-col. 7, line 4). Butters does not disclose withdrawing the blood conduit 16 and intraluminal segment 22 through the cuff 28. It would be contrary to the disclosed method to withdraw or remove the blood

conduit 16 and intraluminal segment 22 since the purpose of the method is to attach the blood conduit to the native blood vessel. Accordingly, it is submitted that independent claims 1 and 32 as currently amended are patentably distinguished from Butters, and as such, it is respectfully requested that the 102(b) rejection with respect to claims 1, 7, 32 and 38 be withdrawn.

Claims 1, 10, 14, 17, 32 and 42 were rejected under 35 U.S.C. 102(b) as being anticipated by Finch, Jr. et al. (U.S. Pat. No. 6,042,569; hereinafter "Finch").

Finch teaches a cannula 200 (as in Figures 9-10, referred to in Official Action) comprising a tubular body 202 that is implantable in a blood vessel and an access leg 204 (including corrugations 206) that is attached to a side wall of the tubular body 202 and that allows for introduction of drugs or other media into arterial or venous flow (col. 2, lines 46-60). The tubular body 202 may be introduced to the blood vessel through an incision, with the incision being closed to hold the device in place (col. 9, line 40-42). Finch does not disclose withdrawing the access leg 204 through the tubular body 202. It would be contrary to the disclosed method to withdraw or remove the access leg 204 through or from the tubular body 202 since the purpose of the method is to introduce drugs or other media through the access leg 204 and tubular body 202 to the blood vessel in which they are located. The access leg 204 is necessary for the device 200 to function as intended. Accordingly, it is submitted that independent claims 1 and 32 as currently amended are patentably distinguished from Finch, and as such, it is respectfully requested that the 102(b) rejection with respect to claims 1, 10, 14, 17, 32 and 42 be withdrawn.

Also, in the Official Action, claims 3 and 34 were rejected under 35 U.S.C. 103(a) as being unpatentable over Butters. The Official Action additionally provided that the Applicant has disclosed that inserting may be performed either before or after advancing (claim 2), and that "inserting after advancing is simply a reversal of steps which involves only routine skill in the art."

As presented above, with regard to the 102(e) rejection, currently amended independent claims 1 and 32 are patentably distinguished from Butters. Therefore, dependent claims 3 and 34 are also patentably distinct from Butters, and should not be rejected. Accordingly, claims 3 and 34 are in condition for allowance, and withdrawal of the rejection is thus respectfully requested. Claim 3 was, however, amended to correct a typographical error, and such amendment is respectfully requested to be entered.

Claims 5, 6, 11, 12, 13, 18, 19, 20, 36, 37, 40 and 41 were rejected under 35 U.S.C. 103(a) as being unpatentable over Finch in view of Galdonik et al. (U.S. Publication No. 2002/0091398; hereinafter "Galdonik").

With regard to the 103(a) rejection, Finch and Galdonik are not properly combinable. As discussed above, with regard to the 102(b) rejection, Finch does not disclose withdrawing the access leg 204 through the tubular body 202, and is therefore missing an element of the presently claimed invention. Galdonik discloses an apparatus used to deploy a connector structure 200 and a first conduit 10, which is typically a graft, like a vein, in order to make an anatomic connection between the first conduit 10 and a second conduit, which typically is a patient's natural body conduit (paragraph 0081). An apparatus that may be used to deploy the connector structure 200 is disclosed as a balloon catheter 300, and is used to enlarge the connector structure 200 to join the two conduits (paragraph 0081). The balloon catheter is retracted but does not provide a flow of oxygenated liquid. The balloon catheter of Galdonik, and its retractable feature, is not properly combinable with Finch. There is no purpose for a retractable balloon catheter in the device disclosed in Finch, or for any part of the device 200 in Finch to be retractable. The balloon catheter of Galdonik is used to enlarge a connector so as to join two conduits. In Finch, there is nothing being joined. The device 200 in Finch includes the tubular body 202 connected to the access leg 204 through which drugs or other media are delivered to a blood vessel. The device 200, including all parts, is intended to stay in place in order for drugs or other media to be delivered to the blood vessel. Accordingly, claims 5, 6, 11, 12, 13, 18, 19, 20, 36, 37, 40 and 41 are in condition for allowance, and withdrawal of the subject rejection is thus respectfully requested.

Claims 8 and 39 were rejected under 35 U.S.C. 103(a) as being unpatentable over Butters in view of Blum (U.S. Pat. No. 4,230,119; hereinafter "Blum").

As presented above, with regard to the 102(b) rejection, Butters does not include all features of currently amended independent claims 1 and 32, upon which claims 8 and 39 are ultimately dependent. Blum teaches a micro-hemostat that includes a T-shaped member having a tubular bar 11 and a tubular stem 12 which joins the bar to a pressure bulb 13 containing a pressurizing fluid 14, which is preferably sterile saline (col. 3, lines 32-37). The bar portion 11 is inserted through an incision into an artery (col. 5, lines 39-42). The pressure bulb 13 is squeezed to force inflation of cuffs 19 that rigidize the bar 11 in the artery and allow blood to flow through the lumen of the bar 11 and artery (col. 5, lines 47-53). Blum does not include a step of withdrawing any portion of the micro-hemostat, such as the tubular member in the

present inventive method. All of the components of the micro-hemostat are necessary for the device to function, and none are withdrawn through the others. Blum, therefore, fails to remedy the shortcomings of Butters. Accordingly, claims 8 and 39 are in condition for allowance, and withdrawal of the rejection is thus respectfully requested.

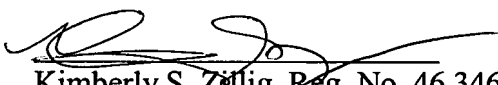
Claims 8 and 39 are, however, currently amended to correct a typographical error. The word "expanded" in each claim is changed to "expand." Entry of such amendment to both claims is respectfully requested.

Claim 16 is rejected under 35 U.S.C. 103(a) as being unpatentable over Finch. The Official Action also provided that it is "well known in the art to use bulbs to provide pressure." As presented above, Finch does not include all features of currently amended independent claim 1, upon which claim 16 is ultimately dependent. In particular, the withdrawing step is missing from Finch. The assertion in the Official Action regarding bulbs fails to remedy the shortcomings of Finch. Thus, claim 16 is in condition for allowance, and withdrawal of the rejection is thus respectfully requested.

Claim 18 is currently amended to correct a typographical error. The word "membership" is changed to "member." Entry of such amendment is respectfully requested.

It is submitted that claims 1-14, 16-20 and 32-42 are currently in condition for allowance, a notice of which is earnestly solicited. If the Examiner finds any issue remaining after consideration of this response, the Examiner is invited to contact the undersigned, at the Examiner's convenience, in order to expedite any remaining prosecution.

Respectfully Submitted,

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